

I am writing my testimony regarding HB 4891.

I am in support of phasing in the funding over the next 3 years, rather than earmarking all of the 9.5% from alcohol revenues at once toward Treatment and Prevention.

I volunteer weekly, every Wednesday, at the two residential long term treatment facilities in Lansing- the Holden House for men, and the Glass House for women. I teach Yoga for 12 Step Recovery with the residents from both facilities. It's a 12 Step Meeting and a Yoga Practice-themed after the meeting topic. I am in long term recovery since 1990, and I'm on the Board of Directors for National Council on Alcoholism. I grow to know each resident at the Treatment Facilities and their struggles. So I created a network for them to stay connected with each other after treatment- and I assist them if finding service work they can embark on within the community.

There is a desperate need for solid transitional treatment after residential treatment. Over and over I have seen men and women leave treatment- go back home without after care support of a transitional program or transitional housing- and be taken from this life as they lose the fight with their disease. I've also seen individuals heal- and then their families begin to heal- and when their family's heal, our community begins to heal- it has a ripple effect.

Alcoholism and Addiction, or Substance Abuse Disorder are a disease - not a moral failure. The stigma and shame associated with them are more deadly than the disease itself! A disease that there is no cure for- but a disease that has a solution- RECOVERY, Education, Prevention, Awareness, and Community Support.

There is a large recovery community in the Lansing area- both state and nation wide.

I am in favor of phasing in the monies over a three year period. This will insure support on a longer term basis which is so needed, as well as give those who have the dollars appropriated a more careful attitude of awareness as to how much to allocate and where.

Respectfully Submitted,

Kathy Reddington

Well Within LLC

Yoga of 12 Step Recovery (Y12SR)

Capital Area Project Vox-Recovery Advocacy

Certified Yoga Instructor-ERYT 200- RYT 500, Y12SR

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Dear Representatives Lori and Haveman,

I am writing to express my support for House Bill 4891 to earmark revenue from alcohol sales to help pay for substance abuse prevention and treatment programs.

I believe there should be more help in Michigan for people suffering from drug and alcohol dependency.

I successfully completed Eaton County's sobriety court in 2006 and celebrated 10 years sobriety earlier this month.

Programs such as this gave me the structure and accountability I needed to make a real, lasting life change. It was only after I was arrested that I had the profound realization that I needed to change. I am grateful to God as it is only by His grace that I was saved.

The recovery programs, support groups, counseling centers and probation, combined with love from church and family provided supportive relationships to help along the way.

I deeply regret many of the choices I made while drinking and using. Please help provide a way out for those who need and want it by maintaining current sobriety court programs and further developing them in rural areas. Also, please increase programs that help people before they get in trouble.

Finally, at the risk of sounding foolish, I ask that you make funding available to faith based recovery centers as well.

Thank you for your consideration.

Sincerely,

Amy Will  
[amywill41@yahoo.com](mailto:amywill41@yahoo.com)  
517-526-7271

July 16, 2014

Good morning Chairman Haveman and Members of the Appropriations Committee,

My name is Mike Tobias and I am a person in long term recovery and what that means to me is that I haven't used any alcohol or illegal drugs in over 20 years. I support passage of HB4891 and strongly urge all of you to support this bill. I also extend my thanks and gratitude to Rep. Lori for sponsoring the bill.

Addiction from alcohol and other drugs takes a tremendous toll on families and society and at some time, it affects nearly everyone on some level. The cost in dollars and cents is enormous as well as the cost in human suffering. During the years that I was actively addicted, I used up more health and emergency services like police, ambulance, emergency room, etc... as well as caused a lot of pain for my family, friends, employers, and others that came in contact with me. When someone decides to seek treatment there is a short window of opportunity. Too often, people seeking treatment will not be able to have an appointment until a week or two after they request services, and then as a result of this delay in services, many people go back to using substances and do not show up for their appointment. When people call for treatment they should be seen the same day or the next day and with adequate funding, this could become a reality.

Last fiscal year funding for prevention and treatment was \$16 million. This is less than half of what it was in 1995 (\$35 million). At a time when the State Legislature is making alcohol and marijuana more available it is critical that more priority and funding be given to substance abuse prevention, treatment, and recovery services. I believe one of the best investments the State of Michigan can make in their young people is through substance abuse prevention. By investing in more prevention, treatment, and recovery services, our State has an opportunity to save money and improve the lives of everyone in our great State of Michigan. This is a win for our State, a win for our children and families, and a win for our communities!

Thank you for your attention in this matter. Again, I strongly urge all of you to support this bill and please contact me with any questions.

Sincerely,

A handwritten signature in black ink that reads "Michael A. Tobias". The signature is written in a cursive, flowing style.

Michael A. Tobias  
113 East Polly St. PO Box 232  
Perry, MI 48872  
517-625-1088  
salmonstacker@gmail.com

July 16, 2014

**House Appropriations Committee**  
Anderson House Office Building  
124 North Capitol Avenue  
P.O. Box 30014  
Lansing, MI 48909-7514

Dear Appropriation Committee Members,

As a resident of District 107, I am asking that you please support H B 4891, a bill that would dedicate 9.5% of tax revenue generated from the sale of alcohol in Michigan for addiction/recovery and prevention services. Michigan has benefited financially from the sale of alcoholic beverages, to the tune of \$363,000,000 in 2012 and that's after all related expenses. I think it's only reasonable that a small portion of that revenue be allocated to help those who are predisposed to addiction, a health care issue.

I am personally working towards long term recovery. This means I have not picked up a drink or drug in nearly 5 years. I have benefited enormously from ongoing support services over this 5 year period and so has my community, but I have also learned of cutbacks in support and seen those services slowly disappear over the last twenty years. I recently learned that Michigan has slashed funding for addiction/recovery services by more than half in those 20 years. Please help restore those services that have been so vital to many seeking and wanting recovery.

Prisons and jails are poor substitutes for dealing with this public health concern. Passage of this bill will be a small but positive step in support of the citizens of our State seeking help in their recovery efforts.

Sincerely,



Curtis M. Patriarche  
6417 W. Numbers Rd.  
Indian River, MI. 49749

July 16, 2014


**House Appropriations Committee**  
Anderson House Office Building  
124 North Capitol Avenue  
P.O. Box 30014  
Lansing, MI 48909-7514

Dear Appropriation Committee Members,

As a resident of District 107, I am asking that you please support H B 4891, a bill that dedicates 9.5% of tax revenue generated from the sale of alcohol in Michigan for addiction/recovery and prevention services. Michigan has benefited financially from the sale of alcoholic beverages, to the tune of \$363,000,000 in 2012, I think it's only reasonable that a small portion of the revenue be set aside to help those who are predisposed to addiction.

I am in long term recovery, which means I have not picked up a drink or drug in nearly 26 years. I have benefited enormously from ongoing support services over this 26 year period and so has my community, but I have also seen those services slowly disappear over the same period. I recently learned that Michigan has slashed funding for addiction/recovery services by more than half in the last 20 years. Please help restore those services that have been so vital to my recovery. Prisons and jails are poor substitutes for dealing with this public health concern.

Sincerely,

A handwritten signature in dark ink, appearing to read "T. J. McHale". The signature is written in a cursive, flowing style.

Thomas J. McHale, MSW  
4560 N. Lake Shore Dr  
Harbor Springs, MI. 49740

- Jeffery Van Treese testifying in support of House Bill 4891.
- I was born and raised in the Petoskey area. I've worked for over 25 years as General Counsel and Executive Vice President for a Palm Beach Florida-based Venture Capital Company. During my time working with the venture capital company, I've had hundreds of proposals brought to me, all asking for money.
- I came to Holland about 3 ½ years ago, by way of Boca Raton, Florida, after almost dying while driving my car into a building at about 50 mph, as a result of a prescription-drug induced blackout.
- After about a year spent recovering physically from the accident, I spent the following year in recovery from my addiction in a spiritually-based recovery residence program in Holland, Building Men for Life.
- For the last year and a half I've served as a corporate director and General Counsel to the statewide Michigan Association of Recovery Residences (MARR) and the West Michigan Association of Recovery Residences (WestMARR). I've also been recently appointed to the advocacy committee for the National Alliance of Recovery Residences (NARR). In addition, for the last year I've served as president of the statewide Michigan Recovery Voices and as General Counsel to Lakeshore Recovery Voices.
- As someone who is passionate about my own recovery, I have researched the question: "What gives people the best chance to recover from addiction and alcoholism".
- The historical answer to the question was to put people with a SUD condition in into a 30 to 90 day treatment facility at a minimum cost averaging about \$5,000 per month.
- The treatment facility model of care is based upon a relatively short-term acute-care model suitable for treating a condition that can be fixed within 90 days, such as a broken hip.
- Medical research has discovered that alcoholism and addiction is a long-term lifelong problem which cannot be fixed by 90 days in an acute care model.

- What medical researchers discovered is that alcoholism and addiction is a long-term neurological problem which requires a long-term solution suitable for treatment of a chronic condition, such as diabetes or heart disease.
- Recent studies at Johns Hopkins University have shown that the success rate of the old short-term treatment model is only about 5%. The good news is the success rate of the new long-term treatment model was over 50% - a tenfold increase. See Johns Hopkins University study, March 2011.
- The cost for an average month's stay in recovery residence is only \$500. Further, every study examining the economics of treating SUD have found that people in long-term recovery residence program are much more likely to obtain employment, pay taxes and pay their own \$500 per month program fee.
- For all those concerned about the hundreds of thousands of people afflicted with SUD in Michigan, such as leaders like yourselves, you must be interested in a long-term program of recovery housing that is more than **10 times more likely** to be successful than the old short-term model ... at about **only 10% of the cost** of the old model.
- To date, there is no money set aside or earmarked for residential recovery housing by the State of Michigan. The individual coordinating agencies and the new PIHP's have no mandate or requirement that they devote any part of their budget to residential recovery housing.
- I respectfully request that this bill be "tweaked" to require that a certain percentage of the SUD budget, say 20%, be devoted to long-term residential recovery housing.
- After evaluating a proposal to fund an opportunity that is 10 times more successful at 10% of the cost of the existing alternatives, I recommend funding. I hope you Representatives agree.